

EXHIBIT C

MASSACHUSETTS UNIFORM CITATION									
DATE CITATION WRITTEN 092803		AGENCY CODE BPP		OFFICER ID NUMBER 11413		COURT CODE 02		TYPE OF CITATION MOTOR VEH.	
MOTOR VEHICLE LICENSE NO. OF VIOLATOR 010 58 7553		STATE MA		CLASS D		CDL LICENSE <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO		RACE B	
VIOLATOR NAME (Last) Charley		(First) Earl		(Initial)		SEX M		NON-INVENTORY MV SEARCH <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	
ADDRESS 32 Bowdoin Ave		CITY/TOWN Dorchester		STATE MA		ZIP 02121		DATE OF BIRTH 11/16/63	
PLATE TYPE PPL		MOTOR VEHICLE REGISTRATION NO. 6778YM		STATE MA		CDL VEHICLE <input checked="" type="checkbox"/> YES <input checked="" type="checkbox"/> NO		HAZARDOUS MATERIAL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
MAKE AND TYPE Kia Optima		YEAR 03		COLOR Gray					
DATE OF OFFENSE 092803		LOCATION OF OFFENSE (Include #, st., hwy, city or town) Tremont St / S. Whitney St		TIME OF OFFENSE 2:04		ACCIDENT <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
A. CHARGES/SUB 89/9		B. CRIM CIVIL		C. CRIM CIVIL		D. SPEEDING <input type="checkbox"/> 90/17 <input type="checkbox"/> 90/18		ASSESSMENT \$50	
DESCRIPTION OF OFFENSE Illegal U-TURN									
MPH IN A		MPH ZONE		<input type="checkbox"/> POSTED <input type="checkbox"/> NOT POSTED		<input type="checkbox"/> CLOCKED <input type="checkbox"/> RADAR <input type="checkbox"/> ESTIMATED			
SPEEDING ASSESSMENTS INCLUDE A \$25 SURCHARGE FOR THE HEAD INJURY TRUST FUND				TOTAL DUE \$50-		<p>NOTICE TO VIOLATOR SEE REVERSE SIDE FOR INSTRUCTIONS</p> <p>NOTICE TO OFFICER ENTER ASSESSMENT \$ AND TOTAL DUE \$ ONLY IF YOU CHECK "ALL CIVIL INFRACTIONS". ENTER COURT ADDRESS BELOW ONLY IF YOU CHECK "CRIMINAL APPLICATION".</p>			
OFFICER CHECK ONE ONLY <input type="checkbox"/> ALL CIVIL INFRACTIONS (See instruction A on back)		<input type="checkbox"/> CRIMINAL APPLICATION (See instruction B on back)		<input checked="" type="checkbox"/> ARREST		<input type="checkbox"/> WARNING (No action required by violator)		COURT ADDRESS Roxbury Court 85 WARREN ST Roxbury MA 02119	
OFFICER CERTIFIES Edward J. Dwyer #		IN HAND TO VIOL		MAILED TO VIOL		IN HAND TO VIOLATOR'S AGENT		AGENT NAME	
VIOLATOR/AGENT ACKNOWLEDGES RECEIPT OF CITATION								AGENT'S LICENSE NUMBER & STATE	

VIOLATOR COPY

"PRESS HARD - You are making 5 copies."